

On removal from the sheep, they were minced upon a board which was soaked in corrosive sublimate and then washed in phenol. They were then transferred to a sterilized glass capsule and brought from the abattoir and put into sterilized test-tubes and covered with equal parts of glycerine and a half per cent. solution of phenol. This extracted some of the organic principles in twenty-four hours, but not by any means all that might be obtained. A sterilized piece of linen was then placed in the cylinder of a syringe, the contents of the test-tube poured in and the piston forced down. Whatever was squeezed out was collected in a bottle. It is equally important to sterilize the skin of the patient when injections are made.

F. P. N.

The Hypnotic Action of Somnal.—By Giovanni Memmo.—In the *Bulletino Alla Reale Accademia Medica di Roma*, anno xviii; fas. viii., the author sums up his experiences thus: In the insane we have obtained good results, especially in epileptic mania, paranoia, alcoholic psychoses, mania, etc. It has many times shown its superiority over chloral, sulfonal and trional because of its hypnotic action and because it was better tolerated and left no after-effects.

Sulfonal in the Treatment of the Insane.—Dr. John H. Scally (Maryland Hospital for the Insane) reports as follows concerning the action of sulfonal:

“In treatment at this hospital, sulfonal has been used for its hypnotic effect in the stages of excitement during attacks of acute mania, mania following epilepsy, recurrent mania, chronic mania, and also in melancholia.

“It has not been our custom to give it regularly each day, but only at those times when, owing to the extreme restlessness and motor excitability of patients, sleep is denied them. In the management of acutely maniacal patients just admitted, when it is necessary to secure immediate rest, and, as is often the case, when the patients' very lives demand it, sulfonal has not failed in any case in which it has been used. Given in drachm doses, preferably in whiskey, not only has it secured from six to eight hours of sound sleep, but it has produced quite a decided amount of motor sedation, lasting from eight to twelve hours after waking. In each case sleep was obtained within one hour after administration and in none was any bad after-effects noticed.

“Three of our cases, two being of acute mania and one epileptic mania, furnish evidence of the value of

sulfonal as a prompt and reliable hypnotic, when given in sufficiently large doses. In the first two cases, both patients had been given morphine injections and other hypnotics by their family physicians, with no appreciable effect. In both cases sulfonal acted promptly. In the third case sulfonal was found to act much more promptly than bromidia, paraldehyde or morphia, all of which had been previously given.

The Treatment of Hysterical Aphonia.—Dr. Seifert (Berl. Klin. Wocheschr., No. 44, Oct. 30, 1893). Seifert employs a combination of laryngeal massage, Olliver's laryngeal compression, and voice-gymnastics.

He begins the treatment with external laryngeal massage in the form of strokes. The patient assists by inspiring deeply when the larynx is stroked. As the respiratory muscles, generally in these cases, fail to act properly, deep inspiration is an important part of the treatment, and must be taught the patient. The stage where this can be properly done by the patient having been reached, the second part of the treatment begins; namely, compression of the larynx, particularly of the upper and post parts of the thyroid cartilage, whilst the patient makes an attempt at phonation. Lateral compression of the larynx is alternated with vibration of the larynx, but here, also, deep inspiration is considered of importance.

When the patient is capable of producing the vowels with slight pressure on the larynx, the third part of the treatment is begun; namely, methodical vocal exercise. The patient is allowed to count from one to twenty, slowly and distinctly, whilst the fingers are placed upon the larynx, which is compressed from time to time. Inability to pronounce a number distinctly requires repetition with lateral compression until the word is spoken clearly. Each phonation is to be preceded by a deep respiration.

Some patients can be made to speak in the first place. This will require longer treatment. The causes, if possible, are to be obviated. Co-existing, nasal, pharyngeal and oral troubles are to be attended to. J. C.

Glycozone.—(*Times-Register* April 22, 1894, Cyrus Edson). The writer considers it to be the best known agent for the treatment of gastric ulcer. One of the best known remedies for alcoholism and other irritative conditions of stomach. The dose is two teaspoonfuls in a wine glass of water after meals.